

AMENDMENTS TO THE CLAIMS

1. (Currently Amended) A method for heart failure assessment in an individual, comprising the steps of:

a. ~~obtaining information regarding detecting~~ the presence or absence of a deletion of amino acids 322-325 in an alpha-2C adrenergic receptor (α_{2C} DEL322-325) in a sample from an individual;

b. ~~obtaining information regarding detecting~~ the presence or absence of an arginine at position 389 of a beta-1 adrenergic receptor (β_1 Arg389) in a sample from the individual; and

c. if both a homozygous α_{2C} DEL322-325 polymorphism is present and a homozygous β_1 Arg389 polymorphism is present, assessing that the individual is at increased risk for heart failure; ~~and~~

~~d. outputting result of the risk assessment for the individual.~~

2. (Previously Presented) The method according to claim 1, wherein the sample comprises a blood sample, body fluid, tissue sample, or combinations thereof.

3. (Currently Amended) The method according to claim 1, wherein at least one of the detecting steps is performed using the information is obtained from a nucleic acid assay or a protein assay.

4. (Cancelled)

5. (Cancelled)

6. (Previously Presented) The method of claim 1, further comprising the step of selecting a therapy regimen for the individual based on the presence of both the α_{2C} DEL322-325 polymorphism and the β_1 Arg389 polymorphism, wherein the therapy regimen delays development of heart failure in the individual.

7-10 (Cancelled)

11. (Previously Presented) The method according to claim 6, wherein the therapy regimen comprises administration of an agonist of α_{2C} DEL322-325, an antagonist of β_1 Arg389, or both.

12. (Previously Presented) The method according to claim 6, wherein the therapy regimen comprises life-style changes.

13. (Currently Amended) The method of claim 6 1, further comprising the step of selecting a therapy regimen for the individual based on the presence of both the α_2C DEL322-325 polymorphism and the $\beta_1Arg389$ polymorphism, wherein the therapy regimen delays ~~development of heart failure by delaying progression or~~ early death associated with the heart failure.

14-17 (Cancelled)

18. (Previously Presented) The method of claim 1, further comprising the step of counseling the individual regarding the potential risk of developing a heart failure based on the presence of both the α_2C DEL322-325 polymorphism and the $\beta_1Arg389$ polymorphism.

19-23 (Cancelled)